DLN: 93493196012153

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public

► The organization may have to use a copy of this return to satisfy state reporting requirements

Δ F.	r the '	2011 67	lendar year, or tax year beginning 09-01-2011	and ending 08-31-201	2		
		pplicable	C Name of organization	. and ending 00-31-201		D Employer ider	tification number
_	dress ch		Bill of Rights Institute			48-0891418	<u> </u>
_	me chai	_	Doing Business As			E Telephone nui	nber
_	tıal retui	-	Number and street ( D.O. hour force)	ad to atroot address \ Danie (	uto	(703)894-1	776
_	rminated		Number and street (or P O box if mail is not delivere 200 N Glebe Road No 200	ed to street address)  Room/st	lite	<b>G</b> Gross receipts \$	2,286,557
_		-	City or town state or country and 7ID + 4		_		
_	ended i		City or town, state or country, and ZIP + 4 Arlington, VA 222033728				
App	plication	n pending					
			F Name and address of principal officer Tony Woodlief		I .	s a group return	
			200 N Glebe Road No 200		affilia	tes/	⊤Yes ▼ No
			Arlıngton, VA 222033728		H(b) Are al	l affiliates include	d?
. T-							(see instructions)
і та	x-exem	npt status	▼ 501(c)(3)	4947(a)(1) or   527	H(c) Grou	p exemption nun	nber 🟲
J W	ebsite	e: 🕨 www	v billofrightsinstitute org				
<b>∢</b> For	m of org	ganızatıon	✓ Corporation Trust Association Other ►		L Year of for	mation 1979 M	State of legal domicile KS
Pa	rt I	Sum	mary			•	
	1 8	Briefly de	escribe the organization's mission or most sig	nıfıcant actıvıtıes			
01	]	To educa	te the public about our country's Founding Pr	inciples			
Governance	-						
Ē	-						
<u> </u>	2 0	Check th	ıs box ► if the organization discontinued its	operations or disposed	of more than 2	5% of its net as	sets
			of voting members of the governing body (Part			3	5
Acuvilles &	1		of independent voting members of the governi			<u> </u>	5
<u>≦</u>	1		mber of individuals employed in calendar year		-	5	27
	1		mber of volunteers (estimate if necessary) .			6	0
¥	1		related business revenue from Part VIII, colu			7a	0
			lated business taxable income from Form 990			7b	0
	<del>  •</del>	Tec dine	nated business taxable income noin roini 550	1,11110 3 1 1 1	Prio	r Year	Current Year
	8	Contri	outions and grants (Part VIII, line 1h)		1110	1,836,993	2,015,700
ā	9		m service revenue (Part VIII, line 2g)		110,679	190,429	
Revenue	10	_	ment income (Part VIII, nine 2g)		1,559	478	
Æ	11		revenue (Part VIII, column (A), lines 5, 6d, 8			260,764	53,409
	12		evenue—add lines 8 through 11 (must equal F			200,704	33,403
	1					2,209,995	2,260,016
	13	Grants	and similar amounts paid (Part IX, column (A	(), lines 1-3 )		128,700	9,750
	14	Benefi	s paid to or for members (Part IX, column (A)	), line 4 )		0	0
ø	15		s, other compensation, employee benefits (Pa	art IX, column (A ), lines		1 506 341	1 252 226
ğ		5-10)	15 1 5 75 177 1 70 1	4.4.		1,596,241	1,352,336
Expenses	16a		sional fundraising fees (Part IX, column (A), li			65,000	39,000
ă	Ь		ndraising expenses (Part IX, column (D), line 25)			1 0 4 2 0 0 2	1 161 776
	17		expenses (Part IX, column (A), lines 11a-11		•	1,943,882	1,161,776
	18		expenses Add lines 13-17 (must equal Part I			3,733,823	2,562,862
. 07	19	Reven	ue less expenses Subtract line 18 from line 1		Bii	-1,523,828	-302,846
89 08						of Current ear	End of Year
Net Assets of Fund Balances	20	Total	ssets (Part X, line 16)			1,342,376	1,006,263
A B	21		abilities (Part X, line 26)			262,132	228,865
žŽ	22		sets or fund balances Subtract line 21 from li			1,080,244	777,398
Pai	rt II	Sign	ature Block		•	•	
Jnde (now	r penal	ties of po	erjury, I declare that I have examined this return, f, it is true, correct, and complete. Declaration of				
		****	**		20	13-07-15	
Sign		Signa	ture of officer			ite	
Her			ner Love Treasurer				
			or print name and title				
		Preparer	s <b>k</b>		Check If	1	er identification number
Paid		signature		I I	self- employed •	(see instructions) P01315245	
	arer's	Firm's n	me (or yours Rogers & Company PLLC		. / '	1	
Use (		ıf self-er	nployed),			EIN • 58-267626	1
	J	address,	and ZIP + 4 8300 Boone Boulevard Suite 600			Phone no ▶ (70	3) 893-0300
		1	Vienna VΔ 22182			1	,

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . . . . .

**▼** Yes **「**No

4d Other program services (Describe in Schedule O )
(Expenses \$ 369,084 including grants of \$ ) (Revenue \$ 48,452 )

including grants of \$

) (Revenue \$

369,084

le Total program service expenses►\$ 1,578,320

) (Expenses \$

See Schedule O

(Code

48,452)

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	5 22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,00 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d an complete Schedule K. If "No," go to line 25			No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	. 24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction we a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	1th <b>25a</b>		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? I "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	or <b>26</b>		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substant contributor, or a grant selection committee member, or to a person related to such an individual? <i>If</i> "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part instructions for applicable filing thresholds, conditions, and exceptions)	ίΛ		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part $I$	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13	3)? <b>35a</b>		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than $5\%$ of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19	7 38	Yes	

Down M	Chatamanta Bassadina Othan IDC Filippa and Tau Camplianas	
Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	Check if Schedule O contains a response to any question in this Part V	•	-1	
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	<b>□ 104</b>			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a		No
ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	_	
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
1	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
,	Sponsoring organizations maintaining donor advised funds.	8		
a	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
2	year  Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
а	<b>Note.</b> All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
<b>A</b>	Did the experience receive any newments for indeer tenning convices during the tay year?	ا ۔ ، ،		NI =
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

200 N Glebe Road No 200 Arlington, VA 222033728

(703)894-1776

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			110
	venue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt	10b		
	purposes?			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	O ther officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	100		110
	organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure	_		
17	List the States with which a copy of this Form 990 is required to be filed ►AL, AK, AZ, AR, CA, CO, CT, FL, G  MD, MA, MI, MN, MS, NH, NJ, NM,  OK, OR, PA, RI, SC, TN, UT, VA, W	NY,N	C, ND,	он,
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)	-		
	(3)s only) available for public inspection Indicate how you made these available Check all that apply  Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orga	nızatıor	n 🕨
	The Organization			

# <u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ♦ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization		ated or	ganız	atıo	ns c	ompei	nsate	ed any current or fo	rmer officer, direct	or, or trustee
(A) Name and Title	(B) Average hours per week (describe	Position more unles an	(C) osition (do not check more than one box, inless person is both an officer and a director/trustee)				(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and	
	hours for related organizations in Schedule O)	for elated rganizations in chedule		Highest compensated employee	Former		MISC)	related organizations		
(1) Mark Humphrey Director/Chairman	1 00	х		Х				0	0	0
(2) Ryan Stowers Director	1 00	х						0	0	0
(3) Robert L Testwuide Director	1 00	х						0	0	0
(4) Todd Zywicki Director	1 00	х						0	0	0
(5) Preston Marshall Director	1 00	х						0	0	0
(6) Tony Woodlief President	40 00			х				89,691	0	8,093
(7) Linda Cornish Chief Operating Officer/Secretary	40 00			Х				111,469	0	10,006
(8) Vonda Holliman Treasurer	1 00			Х				0	0	0
(9) Jason Ross Vice President of Education Programs	40 00					х		103,707	0	4,164

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						Repor compen from organizat 2/1099-	table sation the tion (W-	(E) Reportable compensation from related organizations (W- 2/1099-	amou comi fro organ	(F) Estimated amount of oth compensatio from the organization a	
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		elateo nızatı	
1b	Sub-Total				•	•		*						
c d	Total from continuation sheets:  Total (add lines 1b and 1c) .				<u>.</u>	<u>.</u>		<u>-</u>		304,867		0		22,263
2	Total number of individuals (inclusive states of the state	udıng but not lın	nited to	thos		ted	above	) who	received	more tha	n			
3	Did the organization list any <b>forr</b> on line 1a? <i>If "Yes," complete Sch</i>				e, k	ey e	mploy •	ee, o	orhighest o	compens	ated employee	3 Ye	es	<b>No</b>
4	For any individual listed on line 1 organization and related organization.											4		No
5	Did any person listed on line 1a services rendered to the organiz									nization d	or individual for •	5		No
<u>Se</u>	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper the organizatio												
	-	(A) ne and business add	dress							Descr	(B) ription of services	Cor	(C) npensa	ation
	Fotal number of independent conti \$100,000 of compensation from t			ot lin	nited	i to i	those	liste	d above) w	no receiv	ed more than			

Part v		Statement of Revenue					
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ 22	1a	Federated campaigns 1a					
三哥	Ь	Membership dues 1b					
56		·					
जें दे	C	-					
<u> </u>	d	Related organizations 1d					
હ્≟	e	Government grants (contributions) <b>1e</b>					
.≅£	f	All other contributions, gifts, grants, and <b>1f</b>	2,015,700	İ	İ		
₹ <u>2</u>	_	similar amounts not included above  Noncash contributions included in					
<u>=</u> =	g	lines 1a-1f \$					
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f	▶	2,015,700			
Ų 10	ļ						
<u> </u>			Business Code				
E e	2a	Teacher Conf & Seminar	900099	134,660	134,660		
æ	ь	Student Education	900099	55,769	55,769		
<u>.</u>	c						
ž	d						
B							
Program Serwce Revenue	e	0 H add a m a					
Š	f	All other program service revenue					
ΔŤ	g	Total. Add lines 2a-2f		190,429			
	3	Investment income (including dividence		230,123			
		and other similar amounts)	· · · · · · · · · · · · · · · · · · ·	478			478
	4	Income from investment of tax-exempt bond p	· · ·				
	5						
	3	Royalties					
		(ı) Real	(II) Personal				
	6a	Gross rents Less rental					
	Ь	expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
		(ı) Securities	(II) Other				
	7a	Gross amount	(, 0				
		from sales of assets other					
		than inventory					
	Ь	Less cost or other basis and					
		sales expenses					
	C	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising					
i e		events (not including					
<u>5</u>		\$ of contributions reported on line 1c)					
Other Revenue		See Part IV, line 18					
<u>.</u>		a					
Ħ.	b	Less direct expenses $\mathbf{b}$					
ō	c	Net income or (loss) from fundraising	events 🛌				
	9a	Gross income from gaming activities					
		See Part IV, line 19					
		a					
	b	Less direct expenses b					
	С	Net income or (loss) from gaming activ	/ities				
	10a	Gross sales of inventory, less					
		returns and allowances .	_				
			74,993				
	b	Less cost of goods sold b	26,541	48,452	48,452		
	C	Net income or (loss) from sales of inve		40,432	40,432		
	4-	Miscellaneous Revenue	Business Code 900099	4,957	4,957		
	11a	O ther	900099	4,957	4,957		
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
			▶	4,957			
	12	Total revenue. See Instructions	. ▶	2,260,016	243,838	0	478

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	9,750	9,750		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	301,167	167,361	73,741	60,065
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	893,294	579,219	-4,882	318,957
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	67,816	14,679	48,203	4,934
10	Payroll taxes	90,059	54,453	7,796	27,810
11	Fees for services (non-employees)				
а	Management				
b	Legal	42,264	142	28,729	13,393
c	Accounting	13,340		13,340	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	39,000			39,000
f	Investment management fees				
g	Other	74,868	63,053	3,750	8,065
12	Advertising and promotion	4,433	2,997	42	1,394
13	Office expenses	192,062	76,334	3,143	112,585
14	Information technology	35,396	29,417	1,514	4,465
15	Royalties				
16	Occupancy	200,222	144,689	13,597	41,936
17	Travel	108,784	40,068	3,982	64,734
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	392,514	366,209	1,839	24,466
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	26,882	19,624	1,882	5,376
23	Insurance	11,396	8,319	798	2,279
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	Mail shop services	48,235			48,235
b	List rental	9,420			9,420
С	Interest exp /late fees	2,244	1,638	157	449
d	Bad debt expense	329	329		
е					
f	All other expenses	-613	39	-639	-13
25	Total functional expenses. Add lines 1 through 24f	2,562,862	1,578,320	196,992	787,550
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm <b>990</b> (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 2 1.120.798 592.001 Savings and temporary cash investments . . . . . . . 3 10,000 3 135,500 55.723 33.511 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . . . . 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 86.835 8 65.467 9 36,186 9 55.959 Prepaid expenses and deferred charges . . . . 233.865 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 110,040 b Less accumulated depreciation . . . . . 32,834 10c 123,825 11 11 12 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 1,342,376 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 1,006,263 153,718 122,195 17 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 108,414 25 106,670 D . . . . . 26 262,132 26 228,865 **Total liabilities.** Add lines 17 through 25 . . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 191,361 27 Unrestricted net assets . . . . 207,680 888.883 28 569.718 28 Temporarily restricted net assets . . . . . Fund 29 29 Permanently restricted net assets . . . . Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds . . . . . 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 1.080.244 33 777.398 Total net assets or fund balances . . . . . 34 Total liabilities and net assets/fund balances . . . . . 1.342.376 1.006.263 34

Ра	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2.3	260,01
2	Total expenses (must equal Part IX, column (A), line 25)	2			562,86
3	Revenue less expenses Subtract line 2 from line 1	3		·	302,84
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,0	080,24
5	Other changes in net assets or fund balances (explain in Schedule O)	5			,
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		7	777,39
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were i	- cenad		163	
u	on a separate basis, consolidated basis, or both	ssueu			
	▼ Separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

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As Filed Data -

DLN: 93493196012153

### OMB No 1545-0047

Inspection

### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Bill of Rights Institute

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

**Public Charity Status and Public Support** 

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

**Employer identification number** 

Dowl-T	P	f P	blic Charity Ct-	/ All		a marrat as	منطة مقوام	148-0891			
Part I			Iblic Charity Star te foundation becaus		_				instructions	>	
1 F			ion of churches, or a			= -					
2			d in <b>section 170(b)(1</b>				,,(±)(□)(ı).	1			
3   3			pperative hospital se				n 170/h\/1	\(			
4 F				_					(1)(4)(;;;)	Entartha	
4 ,		A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state									
5	_	· ·	erated for the benefi	=	e or univers	ity owned or o	perated by	a governmer	ntal unit des	cribed in	
		<pre>section 170(b)(1)(A)(iv). (Complete Part II ) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</pre>									
6 I											
7 🔽	describ	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)									
8 [			: described in <b>sectior</b>		<b>A)(vi)</b> (Co	mplete Part I	I )				
9			at normally receives					ibutions, mei	mbership fee	s. and aro	SS
- ,	_		rities related to its ex					•	•		
	•		oss investment inco	•	-			, ,			
		-	ganızatıon after June						,		
lo ┌	•		ganized and operated	•			•	•			
ıı [	_		ganized and operated	•		. ,		. , , ,	to carry out	the purpo	ses of
,	one or the box	more public	ly supported organiz ibes the type of supp <b>b</b> Type I	ations descr oorting organ	ribed in sec li <u>za</u> tion and	tion 509(a)(1	) or section es 11e throi	509(a)(2) S ugh 11h	See <b>section</b> ! —		. Check
e   f g	other t section If the c check Since	han foundat n 509(a)(2) organization this box August 17, 2	ox, I certify that the ion managers and oth received a written do 2006, has the organi	her than one etermination	or more pu	blicly support	ed organiza	etions describ	oed in sectio	on 509(a)(	1) or
		ng persons? erson who di	rectly or indirectly c	ontrols, eith	er alone or	together with	persons de	scribed in (ii	)	Yes	No
			governing body of th				F			g(i)	<del> </del>
			er of a person descri		_					g(ii)	<del>                                     </del>
		•	lled entity of a perso			above?				ı(iii)	<del>                                     </del>
h			ng information about							,()	
Nar supp	(iii) Type of organization orted zation  (iii)  (iv) Is the organization in col (i) listed in your governing document?			on in  ced in  rning  Did you notify the  organization in  col (i) of your		ion in your	(vi Is the organiza col (i) ord in the l	he ation in (v ganized Amou		<b>/ii)</b> unt of port?	
			instructions))	Yes	No	Yes	No	Yes	No		
			"								
							1				
							1				
otal							1				

instructions

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

-	under Part III. If the	organization i	rails to qualify u	inger the tests	iistea pelow, ple	ase complete i	2art 111.)
	ection A. Public Support endaryear (or fiscal year beginning	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	<b>(e)</b> 2011	<b>(f)</b> Total
	ın)	(a) 2007	(0) 2000	(6) 2009	(u) 2010	(e) 2011	(I) I OLAI
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	2,993,02	3,235,224	2,333,344	1,836,993	2,015,700	12,414,282
_	grants ") Tax revenues levied for the		1				
2	organization's benefit and either						
	paid to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit						
4	to the organization without charge <b>Total.</b> Add lines 1 through 3	2,993,02	1 3,235,224	2,333,344	1,836,993	2,015,700	12,414,282
5	The portion of total contributions	2,555,02	3,233,221	2,333,311	1,030,555	2,013,700	12,111,202
,	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						5,087,338
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
6	Public Support. Subtract line 5						7,326,944
	from line 4						7,326,944
	ection B. Total Support endar year (or fiscal year	T	Т				
Cui	beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	( <b>d)</b> 2010	(e) 2011	<b>(f)</b> Total
7	Amounts from line 4	2,993,021	3,235,224	2,333,344	1,836,993	2,015,700	12,414,282
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	120,975	56,716	10,323	1,559	478	190,051
	and income from similar sources						
9	Net income from unrelated						
-	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part IV ) Do not include gain or loss					4,957	4,957
	from the sale of capital assets					1,557	1,557
11	Total support (Add lines 7						12,609,290
	through 10)						· · ·
12	Gross receipts from related activiti					12	1,804,005
13	First Five Years If the Form 990 is a check this box and stop here	for the organizati	on's first, second	, thırd, fourth, or f	ıfth tax year as a !	501(c)(3) organiz	zation, ►
	<u> </u>						
	ection C. Computation of Pub			<u> </u>			
14	Public Support Percentage for 2011	-		11 column (f))		14	58 110 %
15	Public Support Percentage for 2010	) Schedule A, Pa	rt II, line 14			15	65 760 %
16a	<b>33 1/3% support test—2011.</b> If the				ine 14 is 33 1/3%	or more, check t	
h	and <b>stop here.</b> The organization qua <b>33 1/3% support test—2010.</b> If the				a and line 15 is 3	23 1/30% or more	check this
U	box and <b>stop here.</b> The organization				a, and inte 15 is a	55 1/5% OF HIGIE,	► F
17a	10%-facts-and-circumstances test-			_	ie 13, 16a, or 16b	and line 14	. ,
	ıs 10% or more, and ıf the organıza						
	in Part IV how the organization mee	ets the "facts and	d circumstances"	test The organiza	ation qualifies as a	a publicly support	· —
h	organization 10%-facts-and-circumstances test-	_2010 Ifthe ora	anization did not a	check a hov on lin	16 13 16a 16h a	r 17a and line	<b>►</b>
U	15 is 10% or more, and if the organ						
	Explain in Part IV how the organiza						
	supported organization						<b>►</b> □
18	Private Foundation If the organization	ion did not check	a box on line 13.	. 16a. 16b. 17a oi	r 17b. check this l	oox and see	

**▶**□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

**▶**[

Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).						
	Facts And Circumstances Test						
	Explanation						

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493196012153

OMB No 1545-0047

Inspection

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** Bill of Rights Institute 140 0001410

		Oursellantians Maintainins Dans A	designed Francisco Other Circlina		7091410	
P	art I	Organizations Maintaining Donor Acorganization answered "Yes" to Form 99	<b>dvised Funds or Other Similar</b> 20, Part IV, line 6.	· Funas (	or Accounts. Cor	npiete ir tne
			(a) Donor advised funds	(	<b>b)</b> Funds and other a	ccounts
1	Totalr	number at end of year				
2	Aggre	gate contributions to (during year)				
3	Aggre	gate grants from (durıng year)				
4	Aggre	gate value at end of year				
5		e organization inform all donors and donor advi are the organization's property, subject to the	<u> </u>		sed	fes
6	used	e organization inform all grantees, donors, and only for charitable purposes and not for the ben			r purpose	
		ring impermissible private benefit			<u> </u>	res No
Pa		<b>Conservation Easements.</b> Complete		" to Forn	n 990, Part IV, line	7.
1 2	☐ P☐ P☐ P☐ Comp	se(s) of conservation easements held by the o reservation of land for public use (e g , recreati rotection of natural habitat reservation of open space lete lines 2a-2d if the organization held a qual	on or pleasure) Preservation of Preservation of	f a certified	cally importantly land historic structure onservation	d area
	easem	nent on the last day of the tax year				
	Tabali			<u> </u>	Held at the End o	f the Year
a		number of conservation easements		2a		
Ь		acreage restricted by conservation easements		2b		
<b>C</b>		er of conservation easements on a certified his	, ,	2c		
d		er of conservation easements included in (c) a		2d		
3	Numb	er of conservation easements modified, transfe	erred, released, extinguished, or termin	nated by th	e organization during	
	the ta	xable year 🗠				
4	Numb	er of states where property subject to conserva	ation easement is located ►			
5		the organization have a written policy regarding ement of the conservation easements it holds		nandling of	violations, and	∕es
6	Staff a	and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation eas	sements di	uring the year ►	
7		nt of expenses incurred in monitoring, inspecti				
/	<b>▶</b> \$		,		,	
8	Does	each conservation easement reported on line 2 i)(4)(B)(i) and 170(h)(4)(B)(ii)?	2 (d) above satisfy the requirements of	section	Γ,	∕es
9	baland	t XIV, describe how the organization reports co se sheet, and include, if applicable, the text of t ganization's accounting for conservation easer	the footnote to the organization's financ			
Pai	rt III	Organizations Maintaining Collection Complete of the organization answered '			ner Similar Asse	ts.
1a	art, hi	organization elected, as permitted under SFAS storical treasures, or other similar assets held le, in Part XIV, the text of the footnote to its fir	for public exhibition, education or rese	earch in fu		
b	hıstor	organization elected, as permitted under SFAS ical treasures, or other similar assets held for le the following amounts relating to these items	public exhibition, education, or researc			
	(i) Re	venues included in Form 990, Part VIII, line 1			<b>►</b> \$	
	(ii) <sub>As</sub>	ssets included in Form 990, Part X			<b>-</b> \$	

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items

Schedule D (Form 990) 2011 Cat No 52283D

Part	•••• Organizations Maintaining Co	llections of Art	<u>, His</u>	<u>stori</u>	<u>cal Tr</u>	easu	res, or O	<u>the</u>	r Similar Ass	sets (d	:ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	he fol	lowing t	that are	e a significa	nt us	se of its collect	ion	
а	Public exhibition		d	Γ	Loan	or exch	nange progr	ams			
b	Scholarly research		e	Γ	Other	-					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furthe	er the o	rganızatıon	's ex	empt purpose ıı	า	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									_ Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answered	Y" t	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	for c	ontribu	itions o	or other ass	ets n		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ving t	able		Г		Δm	ount	
c	Reginning balance						-	1c		Ount	
c d	Additions during the year						-	1d			
e	Additions during the year  Distributions during the year						<u> </u>	1e			
f	Ending balance						-	1f			
	<u>-</u>	000 D+ V I	- 212				L	T1		<del>-</del> ,,	
2a	Did the organization include an amount on Fo		e ZI ′						ı	Yes	│ No
	If "Yes," explain the arrangement in Part XIV				ad !!\/a	o" to [		Do w	h TV   long 10		
Ра	rt V Endowment Funds. Complete	(a)Current Year		)Prior			o Years Back			<b>(e)</b> Four	Years Back
1a	Beginning of year balance	(a) carrent rear	(2	<i>j</i>	. cai	(6)	o rears back	(4)	Timee Years Back	(C). Gai	rears back
ь	Contributions										
С	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as						•		
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
c	Term endowment ▶										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that	are held	d and a	dmınıstered	for	the	Yes	No
	(i) unrelated organizations								3a(i	-	
	(ii) related organizations								3a(i		<del> </del>
	If "Yes" to 3a(II), are the related organizatio	•						٠	3b		
4	Describe in Part XIV the intended uses of th					10					
Pair	t VI Land, Buildings, and Equipme	ent. See Form 99	ιυ, Pa				T				
	Description of property				) Cost o		(b)Cost or o		(c) Accumulated depreciation	(d)	Book value
	Land		-								
<b>b</b> 1	Buildings		•								
c I	Leasehold improvements						10	,585	5,37	'0	5,215
d I	Equipment						223	,280	104,67	'0	118,610
	Other										
Tota	<b>I.</b> Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colui	nn (B)	), line	10(c).)						123,825
	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	. ,		. , ,				Schedule D	(Form	-

Part VIII Investments—Other Securities. See F	orm 990, Part X, line 12	<u>2</u> .	
(a) Description of security or category	(b)Book value		l of valuation
(including name of security)	(2)2111111111	Cost or end-of-	year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 )			
Part VIII Investments—Program Related. See		13.	
			l of valuation
(a) Description of investment type	(b) Book value		year market value
Tabel (Calumn (b) should a rupl Form 000. Bart V. sel (B) line 12.)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
	e 15.		<b>(b)</b> Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		<b>(b)</b> Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		( <b>b)</b> Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		<b>(b)</b> Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		( <b>b)</b> Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	e 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Description  (b) Should equal Form 990, Part X, col.(B) line 19	e 15. tion  5.)		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Description (b) Should equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X	e 15. tion  5.) , line 25.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Description  (b) Should equal Form 990, Part X, col.(B) line 19	e 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15  Part X Other Liabilities. See Form 990, Part X	e 15. tion  5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	e 15. tion  5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)	<b>F</b>	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19  Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability  Federal Income Taxes	E 15. tion  5.)		(b) Book value

- (-	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,260,016
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,562,862
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-302,846
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-302,846
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	
1	Total revenue, gains, and other support per audited financial statements	1	2,260,016
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	0
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,260,016
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	0
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	2,260,016
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	2,562,862
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	<del>-</del>	
– a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	0
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,562,862
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		, ,
а	Investment expenses not included on Form 990, Part VIII, line 7b   4a		
b	Other (Describe in Part XIV) 4b	1	
С	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	2,562,862
Par	t XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
Description of Uncertain Tax	Part X	The Institute had no uncertain tax positions for the year ended
Positions Under FIN 48		August 31, 2012

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As Filed Data -

DLN: 93493196012153

OMB No 1545-0047

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**SCHEDULE G** 

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. F See separate instructions.

Open to Public **Inspection** 

Name of the organization Bill of Rights Institute

**Employer identification number** 

48-0891418

Fundraising Act	tivities. Complete	i the c	organizai	uon a	nswered res	to Form 990, Part IV	, line 17.
1 Indicate whether the organ a	nization raised funds clicitations s a written or oral agre Form 990, Part VII)	through a ement wit or entity entities (	iny of the e f g th any ind	follow  F  Glividua  ection  ers) pu	ring activities Chr Solicitation of nor Solicitation of gov Special fundraisin Il (including office with professional insuant to agreemen	eck all that apply n-government grants vernment grants ng events rs, directors, trustees fundraising services? ents under which the fun	<b>V Yes I N</b> adraiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	` '	Gross receipts rom activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
	Lead corporate fundraising initiative		No		0	25,000	-25,000
	Direct mail writing and consulting		No		0	9,000, e	-9,000
	Direct mail packaging design		No		0	5,000	-5,000

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, DC, WV, WI, KY, LA, MO

-39,000

39,000

		(a) Event #1	<b>(b)</b> Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		(event type)	(event type)	(total number)	
2	1 Gross receipts				
:	2 Less Charitable contributions				
3	3 Gross income (line 1 minus line 2)				
۱,	4 Cash prizes				
	5 Non-cash prizes				
,	6 Rent/facility costs				
	<b>7</b> Food and beverages				
	8 Entertainment				
	<b>9</b> Other direct expenses .				
1	10 Direct expense summary Add lin	es 4 through 9 in colum	n (d)	🛌	
1	11 Net income summary Combine li	nes 3 and 10 in column	(d)	•	
rt	<b>IIII</b> Gaming. Complete if the oi	rganızatıon answered	"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
	\$15,000 on Form 990-EZ, lii	ne 6a.	, , , , , , , , , , , , , , , , , , ,		
	\$15,000 on Form 990-EZ, lii	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	\$15,000 on Form 990-EZ, lii  Gross revenue			(c) Other gaming	(Add col (a) through
				(c) Other gaming	(Add col (a) through
	<b>1</b> Gross revenue			(c) Other gaming	(Add col (a) through
	1 Gross revenue			(c) Other gaming	(Add col (a) through
	1 Gross revenue			(c) Other gaming	(Add col (a) through
	1 Gross revenue 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs	(a) Bingo			(Add col (a) through
	1 Gross revenue 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses	(a) Bingo  ☐ Yes ☐ No	□ Yes	Г Yes	(Add col (a) through
	1 Gross revenue	(a) Bingo  Yes No s 2 through 5 in column	T Yes	Г Yes Г No	(Add col (a) throug col (c))
	1 Gross revenue 2 Cash prizes 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses 6 Volunteer labor 7 Direct expense summary Add line 8 Net gaming income summary Com	(a) Bingo  Yes  No  S 2 through 5 in column bine lines 1 and 7 in col	T Yes No  (d)	Г Yes Г No	(Add col (a) throug col (c))
	1 Gross revenue	(a) Bingo  Yes  No s 2 through 5 in column bine lines 1 and 7 in column ation operates gaming ac	Tyes No  (d)	Г Yes	(Add col (a) through col (c))
	1 Gross revenue	(a) Bingo  Yes  No  s 2 through 5 in column bine lines 1 and 7 in column ation operates gaming ac gaming activities in eac	T Yes No  (d)	Г Yes Г No	(Add col (a) through col (c))

Sche	dule G (Form 990 or 990-EZ) 20	11				Page <b>3</b>
11	Does the organization operate ga	aming activities with nonmembers? $oldsymbol{\cdot}$			es [	No No
12		neficiary or trustee of a trust or a mem				
	formed to administer charitable of	gaming?		<b>Г</b> ү	es 「	No
13	Indicate the percentage of gamir	ng activity operated in		1 1		
а				13a		
b	An outside facility			13b		
14	Provide the name and address of records	the person who prepares the organiza	tion's gaming/special events book	s and		
	Name 🟲					
	Address ►					
15a	Does the organization have a co	ntract with a third party from whom the	organization receives gaming			
	revenue?			Гү	es F	- No
b		ning revenue received by the organizat				.,,
	amount of gaming revenue retain	ed by the thırd party 🟲 \$				
c	If "Yes," enter name and address	5				
	Name 🟲					
	Address ►					
16	Gaming manager information					
	Name 🟲					
	Gaming manager compensation I	<b>\$</b> \$				
	Description of services provided	<b>&gt;</b>				
	Director/officer	Employee	Independent contractor			
17	Mandatory distributions					
а	Is the organization required unde	er state law to make charitable distribu	tions from the gaming proceeds to			
	= =				es [	No
b		required under state law distributed tactivities during the tax year > \$	o other exempt organizations or sp	ent		
Par		provide additional information for	responses to quuestion on Sc	hedule G (see		
	Identifier	ReturnReference	Explana	tıon		
<u></u>						

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DLN: 93493196012153 OMB No 1545-0047

**Grants and Other Assistance to Organizations,** Governments and Individuals in the United States Department of the Treasury

Schedule I

(Form 990)

Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Inspection

Name of the organization						Employer identification	on number
Bill of Rights Institute						48-0891418	
Part I General Information	on on Grants and	l Assistance				<b>'</b>	
<ol> <li>Does the organization maintain the selection criteria used to av</li> <li>Describe in Part IV the organiz</li> </ol> Part II Grants and Other A	ward the grants or ass ation's procedures fo Assistance to Gov	sistance? r monitoring the use overnments and O	f grant funds in the Unite	d States  United States. Con	nplete if the organ	nızatıon answered "Y	
Form 990, Part IV, lin Part IV and Schedule	ie 21 for any recip I-1 (Form 990) if	additional space is	nore than \$5,000. Che needed	eck this box if no one	recipient receive	ed more than \$5,000.	Use ▶ ┌
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
2 Enter total number of section 5	01(c)(3) and govern	nent organizations list	red in the line 1 table			<u> </u>	
<ul><li>Enter total number of section 5</li><li>Enter total number of other orga</li></ul>							

Part III	Grants and Other Assistance to Individuals in the United States	. Complete if the organization	answered "Yes'	' to Form 990,	Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.	-			

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Being An American Essay Contest Awards	25	9,750			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring	Part I, Line 2	Schedule I, Part I, Line 2 No grants are paid to individuals. Awards were paid to winners of an educational contest sponsored
Grants in the U S		by BRI No monitoring is required for the use of these cash awards

Schedule I (Form 990) 2011

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DLN: 93493196012153

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

**SCHEDULE M** 

(Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

**NonCash Contributions** 

Name of the organization Bill of Rights Institute

**Employer identification number** 

48-0891418

Pa	rt I Types of Property				40 0031410			
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	<b>(d</b> Method of d contribution	etermı		
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stock .							
11	Securities—Partnership, LLC,							
12	or trust interests							
	Qualified conservation							
	contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ( <u>Software</u> )	Х	1	38,325	Retail value			
26	Other ▶()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received				29			
	for which the organization compl	eted Form 8	3283, Part IV, Donee Ackr	nowledgement	23			
202	During the year, did the organiza	tion rocou	a by contribution any propo	arty reported in Bart I. lines	1 - 2 9 +b >+ ı+		Yes	No
Jua	must hold for at least three year							
	for exempt purposes for the enti				a to be used			No
						30a		No
ъ 31	If "Yes," describe the arrangement of the organization have a gif			rowow of any non-standard	contributions?	31		No
								140
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell i	non-cash	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report	revenuesı	n column (c) for a type of p	roperty for which column (a	) is checked,			
	describe in Part II							

Page 2

#### Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

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SCHEDULE O

As Filed Data -

DLN: 93493196012153

OMB No 1545-0047

Open to Public

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Open to Public Inspection

Name of the organization Bill of Rights Institute	Employer identifi	cation number
· ·	48-0891418	

Identifier Return Reference		Explanation
	Form 990, Part III, Line 1	The mission of the Bill of Rights Institute is to educate young people about the words and ideas of America's Founders, the liberties guaranteed in our Founding documents, and how our Founding principles continue to affect and shape a free society. It is the goal of the Institute to help the next generation understand the freedom and opportunity the Constitution offers.

 Return eference	Explanation
	Teacher Development Conferences & Seminars In the 2011-2012 fiscal year the Institute conducted, more than 40 on-site educational programs for teachers, training more than 1,500 teachers. By focusing on founding principles such as religious liberty, freedom of speech, rights of the accused, federalism, and citizenship. Each program provides history and civics teachers with the tools and background knowledge needed to educate young people about America's founding principles and civic values. The Bill of Rights Institute launched its second consecutive. Founders' Fellows program, an advanced introduction to American constitutional thought designed for early career social studies teachers. Twenty-six teachers were selected through a competitive application process for a program that included readings and discussions of key primary and secondary sources, scholar presentations, and visits to important historic sites. The Institute also conducted a series of advanced colloquia co-sponsored with Liberty Fund. A total of 87 social studies teachers attended six different programs, engaging in discussion about the importance of America's Founding documents in defining and securing our liberty as Americans.

Identifier	Return Reference	Explanation
	Form 990, Part III, Line 4b	Student Education Programs For the 2011-2012 fiscal year the Institute held several student programs including the Being An American Essay Contest, the Constitutional Academy, and student webinars. The Being An American Essay Contest brought more than 6,300 submissions from students. Fifty-seven students attended the Constitutional Academy, a week-long summer course focusing on Constitutional and economic principles. The Institute also held three student webinars regarding student-related Supreme Court cases for forty participants.

Identifier	Return Reference	Explanation
	Form 990, Part III, Line 4c	Teacher Outreach The Bill of Rights Institute continued its marketing of educational materials and professional development programs to teachers and administrators. In order to leverage the Bill of Rights Institute's outreach to teachers across the country. Institute staff along with select teachers in the Institute's National Educator Outreach (NEO), presented Institute programs and curriculum at over 20 local and state teacher conferences reaching 50,000 educators nationally. In addition, through placing ads in teacher publications and with the use of email campaigns, the Bill of Rights Institute estimates it has had marketing contact with tens of thousands of educators over the course of the year. These efforts led to additional sales of Institute curriculum and interest in Bill of Rights Institute professional development seminars.

ldentifier	Return Reference	Explanation
	Form 990, Part III, Line 4d	Instructional Materials Designed to supplement standard U.S. History and Civics textbooks, the Bill of Rights Institute developed the following educational resources in 2011-2012. Supreme Court Document-Based Questions Exploring the Cases that Changed History - Property Rights cases. This 60-page booklet, distributed entirely electronically, provides high school teachers with tools to teach the landmark Fifth Amendment cases of Kelo v. New London, Lucas v. South Carolina Coastal Commission, and the Nolan and Dollan cases. The unit also includes additional primary sources, a scholar-written introductory essay, and a complete answer key. Supreme Court Document-Based Questions. Citizens United v. FEC. This complete unit on the Supreme Court case of Citizens United v. FEC explored the case in terms of the principles of republican government and federalism. Launched the summer before the presidential election, the resource has been downloaded free of charge by more than 800 teachers across the U.S. Constitutional Principles Videos. The Institute produced four 6-8 minute videos with accompanying viewing guides on the constitutional principles of Rule of Law, Consent of the Governed. Separation of Powers, and Representative government. These videos were featured, along with student-friendly viewing guides to help reinforce content and additional resources for further exploration, on our website, YouTube, and social media channels. Together, these videos have received more than 25,000 views. Being an American. Exploring the Ideals that Unite Us, Revised Edition. This curriculum for middle school students on the founding documents and civic virtues was updated with stronger and more numerous connections to state history, government and civic virtues was updated with stronger and more numerous connections to state history, government and civic virtues was updated with stronger and more numerous connections to state history, government and civic white boards. From Asbury Park to the Promsed Land. The Music of Bruce Spring

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section A, line 2	The Chairman and Treasurer of the Bill of Rights Institute, who both serve in a voluntary non- compensated capacity, are employed by companies that are related

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		Form 990, Part VI, Section A, line 6	The Bill of Rights Institute has members, and no stockholders	

Identifier	Return Reference	Explanation	
	Form 990, Part VI, Section A, line 7a	The Bill of Rights Institute has members that have the authority to elect the Board of Directors	

Identifier	Return Reference	Explanation	
	Form 990, Part VI, Section A, line 7b	Approval of the Members is required for certain actions like amending certain sections of the governing documents	

Identifier	Return Reference	Explanation		
	Form 990, Part VI, Section B, line 11	Form 990 is prepared by an outside independent CPA firm, which is reviewed by the corporate President and Treasurer. Then a copy will be provided to all Board members for their review prior to signing and filing with the IRS.		

Identifier	Return Reference	Explanation	
VI, Section B, line 12c		A copy of BRI's Policy on Conflicts of Interest and Code of Ethics is given to all Directors, officers and employees at the beginning of their term of service or employment. A conflict of Interest Questionnaire and Acknow ledgement form is also given to each Director, officer and employee to fill out and sign, which acknow ledges that they have received and reviewed the policy, and which allows them to provide information regarding their business and family interests.	

ldentifier	Return Reference	Explanation	
	Form 990, Part VI, Section B, Ine 15	On an annual basis, the BRI Treasurer (or another officer) researches comparable positions within the non-profit sector in Virginia and the local area of DC, using 990 published data. An independent consultant is also used to provide a market study report to gauge where the median salary is for the market in the Virginia and local DC area. In addition, one of the Directors is assigned to conduct a performance review soliciting information from employees, directors and officers. Once all information is gathered, a report on the comparability and performance data is provided to the Board of Directors for their review. The Board then meets to review and discuss all report data, and determines the proper compensation amounts for the year.	

Identifier	Return Reference	Explanation	
	Form 990, Part VI, Section C, line 18	BRI makes its Form 1023 and 990 available upon request. A public disclosure copy of the BRI Federal Form 990 is also available on Guidestar	

Identifier	Return Reference	Explanation	
	Form 990, Part VI, Section C, line 19	Governing documents and conflict of interest policy are available at the BRI offices for inspection by interested stakeholders. Audited financial statements are provided upon request	

### **Additional Data**

Software ID: Software Version:

**EIN:** 48-0891418

Name: Bill of Rights Institute

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program	ı services			
(Code	) (Expenses \$	369,084 including grants of \$	) (Revenue \$	48,452 )